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REVOCATION OF POWER OF ATTORNEY  
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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

<b>Application Number</b>	09/022,228 (Patent 6,110,812)
<b>Filing Date</b>	02/11/1998 (Issued 08/29/2000)
<b>First Named Inventor</b>	Paul L KAUFMAN
<b>Title</b>	CYTOSKELETAL ACTIVE AGENTS FOR GLAUCOMA THERAPY
<b>Art Unit</b>	1614
<b>Examiner Name</b>	FAY, Zohreh A.
<b>Attorney Docket Number</b>	03578.0214.RXUS00

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

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I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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Telephone

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I am the:

Applicant/Inventor.

OR

Assignee of record of the entire interest. See 37 CFR 3.71. Assignee of an undivided interest in the entirety.  
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Michael E. Falk</i>	Date	3-11-10
Name	Michael E. Falk	Telephone	608 263-2500

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. An estimate of the amount of time you require to complete this form, and/or suggestions for reducing this burden, would be welcome to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	09/022,228 (Patent 6,110,912)
Filing Date	02/11/1998 (Issued 08/29/2000)
First Named Inventor	Paul L KAUFMAN
Title	CYTOSKELETAL ACTIVE AGENTS FOR GLAUCOMA THERAPY
Art Unit	1614
Examiner Name	FAY, Zahreh A.
Attorney Docket Number	03678.0214.RXUS00

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Date \_\_\_\_\_

Name \_\_\_\_\_

Telephone \_\_\_\_\_

14 Feb. 2010

Title and Company \_\_\_\_\_

Ruth Granot, Ph.D., Chief Intellectual Property Officer, Yeda Research And Development Co., Ltd.

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\*Total of \_\_\_\_\_ forms are submitted.

The collection of information is required by 37 CFR 1.31, 1.39 and 1.55. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Collection of information is provided by 33 U.S.C. 422 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including time for reviewing, understanding, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date:

14 Feb. 2010

Name:

Telephone:

Title and Company:

**Meir Fast, C.P.A.****Chief Financial Officer**

, Yeda Research And Development Co., Ltd.

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